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PUBLIC HEALTH REPORTS.

VOL. XXVI.

DECEMBER 8, 1911.

No. 49.

ADMINISTRATION OF THYMOL IN HOOKWORM DISEASE.

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A case of unusually severe hookworm disease has recently come under our observation, in connection with which it was necessary to safeguard in every possible way all of the strength possessed by the patient. In order to do this and at the same time expel some of the worms, so that the patient could gain strength, the preliminary dose of magnesium sulphate (usually given the evening before the thymol is administered) was omitted, and very small doses of thymol were used. This plan was followed by satisfactory results. The patient gained in strength, and after several courses of treatment without preliminary salts the standard thymol treatment with salts was instituted.

In several other cases, also, thymol was administered without preliminary salts, and hookworms were obtained.

On theoretical grounds and from practical experience in these cases, we feel justified in recommending that in every severe case the preliminary salts be omitted and (as is already the custom) small doses of thymol be used for one or more courses of treatment.

In one case (male, 16 years old) we obtained 347 worms with 10 grains of thymol, followed but not preceded by salts. In one case (male, 5 years old) 13 worms were obtained with 10 grains of thymol, followed but not preceded by salts. In one case (male, 26 years old) 6 worms were obtained with $32\frac{1}{2}$ grains of thymol, followed but not preceded by salts. In one case (male, 24 years old) 24 worms were obtained with 30 grains of thymol, followed but not preceded by salts. In one case (male, 12 years old) 315 worms were obtained with 25 grains of thymol, followed but not preceded by salts. In one case (male, 17 years old) 2,246 worms were obtained with 25 grains of thymol, preceded and followed by salts.

The number of worms obtained in any given case is influenced not only by the size of the dose of thymol, but also by the number and position of the worms present and the amount of food in the intestinal tract. The principle upon which the small dose is used is that if numerous worms are present the thymol will reach at least some of them, and a case of severe infection can thus gradually be reduced to one of lighter infection, and the risks (if any are present) can be reduced to a minimum. In other words, the element of safety for the patient is increased to the maximum by treating along very conservative lines.